



Colorado Insurance Identification Card
geico.com 1-800-841-3000

GEICO CASUALTY COMPANY
4201 SPRING VALLEY ROAD DALLAS, TX 75244-3694

Policy Number	Effective Date	Expiration Date	
4292736891	01-09-13	07-09-13	
Year	Make	Model	Vehicle ID No.
2006	DODGE	RAM	1D7HA18N96J205895

Insured:
MARTA IRIS CALL
PO BOX 103
DINOSAUR, CO 81610

The above insurance company has issued an insurance policy which complies with the minimum liability limits prescribed by law.

Important Information

Here are your Policy Identification Cards. Please destroy your old cards when the new cards become effective. Due to space limitations on the ID card, only the Named Insured and the Co-insured are listed. For a full list of drivers covered under this policy, please reference the Drivers section of your Declarations Page, which is included with your insurance packet.

Please notify us promptly of any change in your address to be sure you receive all important policy documents. Prompt notification will enable us to service you better.

Your policy is recorded under the name and policy number shown on the card.

If you would like additional ID cards, you can go online to **geico.com** or call us at **1-800-841-3000**.

What to do at the time of an accident.

- Do not admit fault.
- Do not reveal the limits of your liability coverage to anyone.
- Exchange contact information; get year, make, model, plate number, insurance carrier and policy number of all involved. Also, identify witnesses and collect contact information.
- Contact the police or 911 if applicable.
- Contact GEICO by calling **1-800-841-3000** or visit **geico.com** to report the accident.



Washington DC

VERIFICATION OF COVERAGE
(SEE BELOW UNDER CAUTIONARY NOTE)

INSURED

MARTA IRIS CALL
PO BOX 103
DINOSAUR, CO 81610

Policy Number: 4292736891
Effective Date: 01-09-13
Expiration Date: 07-09-13
Registered State: COLORADO

To whom it may concern:
This letter is to verify that we have issued the policyholder coverage under the above policy number for the dates indicated in the effective and expiration date fields for the vehicle listed. This should serve as proof that the below mentioned vehicle meets or exceeds the financial responsibility requirement for your state.
This verification of coverage does not amend, extend or alter the coverage afforded by this policy.

Vehicle Year: 2006
Make: DODGE
Model: RAM
VIN: 1D7HA18N96J205895

COVERAGES	LIMITS	DEDUCTIBLES
Bodily Injury Liability(BI)	\$25,000/\$50,000	
Property Damage Liability(PD)	\$15,000	
Medical Payments(MED)	NO	
Comprehensive(COMP)		1M
Collision(COLL)		1M
Emergency Road Service(ERS)	I accept this coverage	
Rental Reimbursement(RR)	\$30/day, \$900 max per claim	
Uninsured & Underinsured Motorist	NO	

☒ Lienholder ☐ Additional Insured ☒ Interested Party

Other _____

Additional Information:

